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		CU	STOMER CLAIM	and confidence of the second control of the second of the		
				Claim Number		
				Date Received		
	BERNARD L. MADOFF INVESTMENT SECURITIES LLC					
			In Liquidation			
et moses on a second	(Please prin	DEC	EMBER 11, 2008			
	Name of Cu Mailing Ad City: Account No	dress: Ab Galie - Zeliga	DVIV techo Let State: [SQF	E_Zip:		
	- mapajor 1.	D. Number (Social Securit	y No.):			
	SI PI RI RI SI LE CE	HOULD BE FILED FOR INTERPRETATION AFFORDED LECEIVED BY THE TRUST CEIVED AFTER THAT DATE OF THE CONTROL OF THE C	EACH ACCOUNT A JNDER SIPA, ALL O TEE ON OR BEFOR ATE, BUT ON OR BI DCESSING AND TO CLAIMANT. PLEASE RECEIPT REQUEST			
	******	**************************************	*********	*****		
iee attached Lettrev	1. Cla	im for money balances as	of December 11, 2	2008:		
	- <del>V</del> a. b. c.	The Broker owes me a I owe the Broker a Deb If you wish to repay the please insert the amour attach a check payable Trustee for Bernard L. M. If you wish to make a pawith this claim form.	Credit (Cr.) Balance it (Dr.) Balance of Debit Balance, it you wish to repay to "Irving H. Picard, ladoff Investment S	and Esq., ecurities LLC."		

m for securities as of December 11, 20		the state of the s
NOT CLAIM ANY SECURITIES YOU H	IAVE IN YOUR POSS	FSSION
The Broker owes me securities		<u>NO</u>
I owe the Broker securities		
If yes to either, please list below:		
Name of Security	Number o Face Amou The Broker Owes Me (Long)	f Shares or nt of Bonds I Owe the Broker (Short)
	The Broker owes me securities  I owe the Broker securities  If yes to either, please list below:	If yes to either, please list below:  Number of Face Amou  Name of Security.  Name of Security.

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

NOT	E: IF "YES" IS MARKED ON ANY ITEM, PROVIDI ON A SIGNED ATTACHMENT. IF SUFF PROVIDED, THIS CLAIM FORM WILL B COMPLETION.	E A DETAILED EXPLANATION ICIENT DETAILS ARE NOT E RETURNED FOR YOUR
3. Prealemptions 4.	Has there been any change in your account since December 11, 2008? If so, please explain.  Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?	YES NO  CRAVED BY THE RULL
<u>5.</u>	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?	
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.	
se th	Have you ever given any discretionary authority to any person to execute ecurities transactions with or through ne broker on your behalf? Give names, ddresses and phone numbers.	
9. Ha ev Inv so,	ave you or any member of your family /er filed a claim under the Securities vestor Protection Act of 1970? if , give name of that broker.	X
Ple pre	ease list the full name and address of anyone assist	ing you in the

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If you cannot compute the amount of your claim, you may file an estimated claim. In that case, please indicate your claim is an estimated claim.

IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.

THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF.

Date 28) UNE 2009	Signature
Date	Signature
/15	- And the second

(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

Irving H. Picard, Esq.,
Trustee for Bernard L. Madoff Investment Securities LLC
Claims Processing Center
2100 McKinney Ave., Suite 800
Dallas, TX 75201